Immunization Registry Progress in New York City

Note: Unless otherwise stated, the information in this fact sheet was obtained from data and information submitted by the program manager or representative from the immunization program in New York City.

Immunization Coverage in New York:

According to National Immunization Survey (NIS) data for July 1997 to June 1998, the percentage of children 19-35 months of age who were up-to-date with 4 doses of diphtheria, tetanus, pertussis, 3 doses of poliomyelitis, and 1 dose of measles, mumps, rubella vaccine was 79%.

Facts about Citywide Immunization Registry (CIR):

- CIR collects and manages immunization data for the 5 boroughs of New York City.
- The targeted age group for CIR is birth through age 7.
- Currently, entities which link with the registry include:

Vital Records Department

Community/Migrant Health Centers

Public Health Clinic Patient Management/Billing system

Private Medical Practice Management/Billing Systems

Managed Care Organizations

• As of June 21, 1999:

101% of children less than 6 years old were enrolled in the registry.

88% of all providers were enrolled in the registry.

Other registry plans, accomplishments, and successes:

Passing the NYC Health Code Amendment mandating reporting by all NYC providers. Establishing CIR infrastructure in NYC Department of Health (securing substantial local funding, hiring staff, purchasing equipment, acquiring CIR development and operations vendors and the medical and Health Research Association, Inc., the vendor for CIR marketing services).

Establishing an important collaborative advisory committee, known as the New York City Coalition for Immunization Initiatives. This coalition is a group of public and private health care providers, provider associations (e.g., local chapter of the American Academy of Pediatrics and the New York County Medical Society), advocates for children, elected officials, and other community leaders committed to reducing vaccine-preventable disease in children. The Coalition plays an integral role in building a broad base of support for the CIR. The advocacy of the Coalition was key to passing the NYC Health Code Amendment mandating reporting and to securing local funding.

Future objectives include:

Improving quality assurance protocols, especially for automated protocols, especially for automated de-duplication, to assure a high level of completeness and accuracy of CIR data.

Recruiting the private practitioners no currently reporting to the CIR.

Promoting use of CIR data by providers, MCOs and other to improve immunization coverage levels.

Some challenges and barriers affecting registry progress:

The most significant problem is to assure the completeness and accuracy of CIR records. It is particularly challenging to de-duplicate a database of this size.

Overcoming resistance from private practitioners to reporting is also a problem.

Promoting use of CIR data by providers, managed care organizations (MC)s), and other organizations, to improve immunization coverage levels is a major challenge.

Current political or legislative factors affecting registry activity:

NYC Health Code Amendment was passed in April 1994 that authorized the NIC Department of Health to establish the CIR and mandated reporting to the CIR by all NYC providers, effective January 1, 1997. The mandate requires that NYC providers report all immunizations given to children under age eight to the CIR. This amendment has been an integral factor leading to the high level of reporting by NYC providers.

Current registry funding:

CIR is currently funded by the City of New York, the State of New York, the Centers for Disease Control and Prevention's National Immunization Program, and the Robert Wood Johnson Foundation.

Helpful immunization and immunization registry contacts in New York City:

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